

**REGISTRATION**

**ORFED TRAINING DAY**

The Grand Hotel/ Salem Convention Center

200 Commercial Street SE Salem Oregon 97301

**MAY 18th, 2024**

**Company Name Phone Mailing Address City State Zip**

**Email Contact Person**

**Early bird registration with paid membership before March 18, 2024: $ 80.00**

Between March 19th and May 10th, 2024: Member $100.00 / Non-Member $350.00

Week of Conference: Member $160.00 / Non-Member $350.00

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Member** | *Non-Member* |
| 1 |  | **□** | □ |
| 2 |  | **□** | □ |
| 3 |  | **□** | □ |
| 4 |  | **□** | □ |
| 5 |  | **□** | □ |
| 6 |  | **□** | □ |
| 7 |  | **□** | □ |
| 8 |  | **□** | □ |
| 9 |  | **□** | □ |
| 10 |  | **□** | □ |
| 11 |  | **□** | □ |
| 12 |  | **□** | □ |
| 13 |  | **□** | □ |
| 14 |  | **□** | □ |
| 15 |  | **□** | □ |
| 16 |  | **□** | □ |
| 17 |  | **□** | □ |
| 18 |  | **□** | □ |
| 19 |  | **□** | □ |
| 20 |  | **□** | □ |

 Total number registered \_\_\_\_\_\_\_\_ x Registration Fee = Remittance $

 Include Membership fee: (See supporting membership form for suggested dues) $\_\_\_\_\_\_\_\_\_\_\_

Pay by credit card Pay by check Total amount enclosed/Charged $

 **(NOTE: VISA/Mastercard – add 4%; American Express/Discover – add 8%)**

Name on Card: Address for Card Statement: Card Number: Expiration: CVV#: Zip Code:

Email to: ORFEDTreasurer@gmail.com OR

Remit to : Oregon Fire Equipment Distributors, C/O Mike Mann, 231 N Tillamook St., Portland, OR 97227

**\*\*\*NOTE\*\*\* Vehicle height limit of 6 ft, 10 inches is enforced at the conference per hotel requirements**